

H.444's first 13 Sections codify Vermont's Health Information Technology policy in alignment with the HITECH Act (the Health Information Technology for Economic and Clinical Health Act), Title 13 of the federal stimulus bill or American Recovery & Reinvestment Act (ARRA). This crosswalk highlights the federal funding opportunities H.444 positions the state to compete for; details on grants and applications expected in May.

<b>ARRA HITECH Act Section</b>	<b>H.444 Section</b>	<b>Function</b>	<b>Federal Agencies</b>	<b>State Agencies, Organizations Involved</b>
Sec. 3013 State Grants <sup>1</sup>	Sec. 1-8	Overall coordination of state HIT/HIE	Office of the National Coordinator of Health Information Technology (ONCHIT)	Agency of Administration designee, AHS: AHSCO, OVHA, VDH
Sec. 3011 Immediate Funding <sup>2</sup>	Sec. 1 <sup>2</sup>	Grants for HIT architecture (HIE), development of Electronic Health Records (EHR), training and best practices, telemedicine, clinical data repositories and registries, technologies to protect individually identified health information	ONCHIT, Health Resources & Services Administration (HRSA), including Office of Health Information Technology (OHIT), Office of Rural Health Policy (ORHP), and the Bureau of Primary Health Care (BPHC), Centers for Medicare and Medicaid Services (CMS), Centers for Disease Control and Prevention (CDC), and the Agency for Healthcare Research and Quality (AHRQ).	AHS: AHSCO, VDH, DMH, DAIL, DOC, DCF; AoA: DII; Vermont Health Care providers, institutions, and organizations; VITL
Sec. 3012 Implementation Assistance	Sec. §9352, 2-7	Health Information Technology Regional Extension Centers Program	ONCHIT	VITL, and/or Vermont higher education institutions
Sec. 3014	Sec. 9, 10, 11	State HIT Loan Fund (opportunity to leverage Vermont Health IT Fund with new federal resources) for "widespread adoption of certified EHR technology"	ONCHIT	AHSCO, OVHA, for coordination of loans and grants to VITL, Vermont providers and institutions
Sec. 3016	Sec. 12	Education in Health Informatics. State to convene stakeholders group, issue report with recommendations on Vermont programs and curricula, with implementation timeline, due 11/15/09.	ONCHIT	Agency of Administration designee, Vermont higher education institutions

<sup>1</sup> Application from state to feds for grants to support coordination of HIT/HIE and possibly (depending upon federal guidance) sub-grants to Vermont organizations.

<sup>2</sup> Applications from the state and directly from Vermont organizations for grants coordinated as specified in Sec. 1(f)

## Health Information Technology/Health Information Exchange (HIT/HIE) and federal ARRA HIT/HIE provisions and timeline:

<p><b>Today</b></p> <p>Policy coordination by VITL: draft Update of VT HIT Plan completed but not yet distributed because it doesn't fully reflect post-ARRA environment; updated Privacy &amp; Security policies released for public comment.</p> <p>Statewide HIT implementation programs coordinated by VITL: FY09 grant \$'s from Health IT Fund and GF/GC appropriation (2 grant contracts with DII that have paid out \$1,646,563 YTD) for deliverables including: running the HIE, building lab interfaces to 6 hospitals, technical assistance for 4 PC practice (10 FTEs) EHR installation and practice transformation, state immunization registry interface, other projects.</p>	<p><b>Upon Passage of H.444</b></p> <p>State HCR staff will update VT HIT Plan for submission to federal agencies (as detailed in Sec. 8, including additional public input) for use in grant applications for federal funding to state and to state health care providers, institutions.</p> <p>State will be able to leverage additional federal funding with Vermont Health IT Fund through grants (which match state dollars) and establishment of HIT loan fund (funded with combination of state funds matched in federal grant).</p> <p>Statewide HIT implementation programs will accelerate. VITL FY10 funding (no GF, just HIT Fund, other sources) will operate state HIE network and build on existing projects (support for Blueprint, DocSite, lab, hospital interfaces, Medication History database, public health registry interfaces, support for EHR installation and practice transformation).</p>	<p><b>2009 into 2010</b></p> <p>Goal to build out full HIE interfaces built to all Vermont hospitals, many regional hospitals, labs. HIE interfaces to provider practices expand in all hospital service areas.</p> <p>Installation of EHR (aligned to federal certification standards) in primary care and specialty medical practices, mental health, long term care, and other health care providers accelerates through variety of channels. Many will utilize a combination of funding resources, including:</p> <ul style="list-style-type: none"> <li>- federal grants,</li> <li>- state grants,</li> <li>- state, commercial loans, and</li> <li>- capital investment by providers (individuals and institutions).</li> </ul> <p>State will coordinate funding streams, ensure use of national standards for development of an interoperable system of health information exchange and adherence to state and national privacy and security standards. State will seek funding, begin to modernize interfaces of state government IT systems, improve internal IT interoperability for HIE internally and externally.</p>	<p><b>Into 2011 through 2014 and beyond</b></p> <p>With statewide, high speed broadband access available, build out HIE interfaces and telemedicine capacity to all Vermont health care providers, institutions, public health and human service agencies and providers.</p> <p>Expectation of continued expansion of EHR adoption through loan and grant funding with implementation support offered by VITL, Regional Extension Center Programs, vendors, and other contractors.</p> <p>Standards based clinical messaging system, secure health data transfer, widely available between VT providers' EHR through VITL HIE.</p> <p>Federal incentive payments from Medicare and Medicaid (that can be used to repay loans for EHR adoption and/or supplement state and federal grants) become available to providers able to demonstrate "meaningful use."</p> <p>Vermont likely to be first state in nation fully wired for HIT/HIE and telemedicine.</p>
<p><b>Under H.444</b></p> <p>Policy coordination and oversight by state: authorizes Agency of Admin. or designee to update VT HIT Plan, provide oversight of HIT policy implementation and coordination of federal grants and state HIT loan and grant funds.</p> <p>Enables state to ensure alignment of all Vermont applications for ARRA funding including: grants to state, grants to state institutions and providers, funding to state for loan fund to augment state HIT Fund for loans and grants to VT providers, certification of "meaningful use" of EHR for federal incentive \$s.</p>	<p>VITL and other eligible Vermont organizations apply to state Health IT Fund for resources to support EHR adoption, expansion.</p> <p>State educational institutions develop strategic vision and plan for HIT and health informatics training and education, workforce development.</p>		